

Fill in this information to identify the case:Debtor name **HILLCREST GOM, INC.**

United States Bankruptcy Court for the: Southern District of Texas

(State)

Case number (If known): _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.1 Creditor's name

Westchester Fire Insurance Co., As Agent

Describe debtor's property that is subject to a lien

Reimbursement Claim

\$ unknown

\$ 201,984.00

Creditor's mailing address

PO Box 1000

Philadelphia, PA 19105

Bond No. K07471191

West Cameron Block 310 and 311 OCS-G 17789

Describe the lien

Performance Bond

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒ No
☐ Yes

Date debt was incurred 27 November 2006**Is anyone else liable on this claim?**

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____**Do multiple creditors have an interest in the same property?**

- ☒ No
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

2.2 Creditor's name

Westchester Fire Insurance Co.

Describe debtor's property that is subject to a lien

Reimbursement Claim

\$ unknown

\$ 336,640.00

Creditor's mailing address

PO Box 1000

Philadelphia, PA 19105

Bond No. K04991850

Vermilion Block 225 and 226 OCS-G 01143 and OCS-G 01144

Describe the lien

Performance Bond

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒ No
☐ Yes

Date debt was incurred 27 November 2006**Is anyone else liable on this claim?**

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____**Do multiple creditors have an interest in the same property?**

- ☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ unknown

Debtor

HILLCREST GOM, INC.
Name

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.****2.3 Creditor's name**

Westchester Fire Insurance Co.

Describe debtor's property that is subject to a lien

Reimbursement Claim

\$ unknown \$ 435,002.00

Creditor's mailing address

PO Box 1000 X

Philadelphia, PA 19105

Bond No. K04991886

West Cameron Block 593 and 594 OCS-G 02023

Describe the lien

Performance Bond

Creditor's email address, if known**Is the creditor an insider or related party?**☒ No
☐ Yes**Date debt was incurred** 27 November 2006**Is anyone else liable on this claim?**☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Last 4 digits of account number** _____**Do multiple creditors have an interest in the same property?**☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

_____**As of the petition filing date, the claim is:**

Check all that apply.

☒ Contingent
☒ Unliquidated
☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____**2.4 Creditor's name**

Westchester Fire Insurance Co.

Describe debtor's property that is subject to a lien

Reimbursement Claim

\$ unknown \$ 547,566.00

Creditor's mailing address

PO Box 1000

Philadelphia, PA 19105

Bond No. K04991795

Ship Shoal Block 247 and 248 OCS-G 01028 and OCS-G 01029

Describe the lien

Performance Bond

Creditor's email address, if known**Is the creditor an insider or related party?**☒ No
☐ Yes**Date debt was incurred** 27 November 2006**Is anyone else liable on this claim?**☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Last 4 digits of account number** _____**Do multiple creditors have an interest in the same property?**☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

_____**As of the petition filing date, the claim is:**

Check all that apply.

☒ Contingent
☒ Unliquidated
☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____